



DEPARTMENT OF THE ARMY
HEADQUARTERS, U. S. ARMY EUROPE REGIONAL MEDICAL COMMAND
CMR 442
APO AE 09042

REPLY TO
ATTENTION OF:

MCEU-PD

26 September 2002

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: ERM Command Policy Letter 17, Evaluation Reporting for Active Duty

1. References:

- a. AR 623-105, Officer Evaluation Reporting System
- b. AR 623-205, Noncommissioned Officer Evaluation Reporting System
- c. FM 22-100, Army Leadership

2. The timely preparation and processing of the evaluation reports for all soldiers assigned to the Europe Regional Medical Command is of the utmost concern for commanders at all levels. We owe it to our soldiers to provide them the ability to improve their performance and development through appropriate counseling and evaluations. I will expect each subordinate commander to establish a well-published rating scheme, establish a process to preclude late reports and ensure a follow-up plan is in place to trouble shoot problem areas. The success of any evaluation process is the proactive planning at the user level.

3. Timeliness standards are identified in AR 623-105 for reports to arrive HQDA not later than 90 calendar days from the "THRU" date of the report for the DA Form 67-9, Officer Evaluation Report. Subordinate Commanders will ensure that reports at their level are prepared well enough in advance to provide action prior to the end date of the report. The Medical Personnel Office may have oversight of Annual Reports but all levels are to be involved in the proper processing of any other report due (i.e.: Change of Rater/Duty, Complete the Record, PCS, etc). Due to the flexibility the Senior Rater has in the processing of the evaluation report and the ability to send it direct, I will hold subordinate commanders responsible for the timely submission of reports to HQDA. A local status sheet will be maintained to record this process. Any OER forwarded to ERM Command for endorsement will have a current ORB attached.

4. AR 623-205, Noncommissioned Officer Evaluation Reporting System, identifies those Department of Army standards for timely submission of reports. The rating scheme/chain will correspond as nearly as possible to the chain of command and supervision within the medical treatment facility and at all clinics within the footprint of the medical treatment facility. Commanders at all levels must ensure that the reports are submitted in the timeframes established by the local Personnel Service Companies (PSC) to allow all reports to reach US Army Enlisted Records and Evaluations Center (USAEREC) via first class mail not later than 60 days after the end month of the report.

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For noncommissioned officer evaluation reports of the ARNGUS/USAR soldiers, the report must be received within 90 days after the end month of the report. If there are any questions about the need to process or prepare a report and the amount of time allotted, the medical treatment facility personnel office or the local PSC must be contacted. Those NCOERs forwarded to the ERM for endorsement or review will include a current ERB with the report.

5. Should (for any reason) an evaluation report be identified as late to HQDA, the medical treatment facility commander will prepare and submit a Letter of Lateness explaining the unpreventable circumstances for the late evaluation. This letter will be signed by the medical treatment facility commander explaining corrective action taken to preclude any other occurrence.

6. The proponent for this policy is the ERM ACSPE at DSN 371-3353.


ELDER GRANGER
Brigadier General, USA
Commanding

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